

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J. G.		7/11/50
Q.I.P.E. CLASSIFIER			
FORMALITY REVIEW		13121	3-28-50
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ----- Rejected      N ----- Non-elected  
 o ----- Allowed      I ----- Interference  
 - (Through numeral) ----- Canceled      A ----- Appeal  
 + ----- Restricted      O ----- Objected

**BEST AVAILABLE COPY**

Claim	Date	Claim	Date	Claim	Date
1	5/1/50	5	5/1/50	101	
2	5/1/50	6	5/1/50	102	
3	5/1/50	7	5/1/50	103	
4	5/1/50	8	5/1/50	104	
5	5/1/50	9	5/1/50	105	
6	5/1/50	10	5/1/50	106	
7	5/1/50	11	5/1/50	107	
8	5/1/50	12	5/1/50	108	
9	5/1/50	13	5/1/50	109	
10	5/1/50	14	5/1/50	110	
11	5/1/50	15	5/1/50	111	
12	5/1/50	16	5/1/50	112	
13	5/1/50	17	5/1/50	113	
14	5/1/50	18	5/1/50	114	
15	5/1/50	19	5/1/50	115	
16	5/1/50	20	5/1/50	116	
17	5/1/50	21	5/1/50	117	
18	5/1/50	22	5/1/50	118	
19	5/1/50	23	5/1/50	119	
20	5/1/50	24	5/1/50	120	
21	5/1/50	25	5/1/50	121	
22	5/1/50	26	5/1/50	122	
23	5/1/50	27	5/1/50	123	
24	5/1/50	28	5/1/50	124	
25	5/1/50	29	5/1/50	125	
26	5/1/50	30	5/1/50	126	
27	5/1/50	31	5/1/50	127	
28	5/1/50	32	5/1/50	128	
29	5/1/50	33	5/1/50	129	
30	5/1/50	34	5/1/50	130	
31	5/1/50	35	5/1/50	131	
32	5/1/50	36	5/1/50	132	
33	5/1/50	37	5/1/50	133	
34	5/1/50	38	5/1/50	134	
35	5/1/50	39	5/1/50	135	
36	5/1/50	40	5/1/50	136	
37	5/1/50	41	5/1/50	137	
38	5/1/50	42	5/1/50	138	
39	5/1/50	43	5/1/50	139	
40	5/1/50	44	5/1/50	140	
41	5/1/50	45	5/1/50	141	
42	5/1/50	46	5/1/50	142	
43	5/1/50	47	5/1/50	143	
44	5/1/50	48	5/1/50	144	
45	5/1/50	49	5/1/50	145	
46	5/1/50	50	5/1/50	146	
47	5/1/50	51	5/1/50	147	
48	5/1/50	52	5/1/50	148	
49	5/1/50	53	5/1/50	149	
50	5/1/50	54	5/1/50	150	

If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

Best Available Copy